PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

CLAIMS AS FILED - PART I (Column 1) (Column							SMALL TYPE	SMALL ENTITY TYPE OF				OTHER THAN				
TOTAL CLAIMS			62				RATI		FEE		RATE	FEE				
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	EE	375.00	OR	BASIC FEE	750.00				
TOTAL CHARGEABLE CLAIMS			6 2 minus 20=		• 42		X\$ 9	=	378	OR	X\$18=					
INDEPENDENT CLAIMS			3 minus 3 =		0		X42:			OR	X84=					
MU	LTIPLE DEPEN	IDENT CLAIM PI	RESENT				+140	=		OR	+280=					
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTA	L	753	OR	TOTAL					
	С	LAIMS AS A (Column 1)	MENDE	D - PAR (Colur		(Column 3)	SMALL ENTITY			OR	OTHER THAN SMALL ENTITY					
		CLAIMS		HIGH		(Column 3)		-		i 1						
ENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	RATE	=	ADDI- TIONAL FEE	r.	RATE	ADDI- TIONAL FEE				
AMENDMENT	Total	-62	Minus	4	2	. /	X\$ 9=	=	/	OR	X\$18=					
AME	Independent	* 3	Minus *** MULTIPLE DEPENDENT		S CLAINA		X42=		7	OR	X84≃					
	30	60 81	JETTE	PENDEN	CLANVI		+140	-		OR	+280=					
	2/ 000						TO			OR	TOTAL ADDIT, FEE					
		ADDIT. F	בב			MUUII. FEE	 									
		(Column 1) CLAIMS		(Colui	INI 2)	(Column 3)										
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE				
NON	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=					
AME	Independent	*	Minus	AAA	F.CL AINA	-	X42:			OR	X84=					
 	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								,	OR	+280=					
1014								AL EE		OR	TOTAL ADDIT. FEE					
	VN	(Column 3)														
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		(Columnia) HIGH NUM PREVIO	iest Ber	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE				
NON	Total	*	Minus	**		=	X\$ 9	-		OR	X\$18=					
NE NE	Independent	*	Minus	k##		=	X42=				X84=					
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							4		OR	704=	ļ				
	If the policy in col-	ima t le less than 1	ha anta in	hama a series	0°0° in c-	tump 2	+140			OR	+280=					
44	lf the "Highest Nu	imn 1 is less than t imber Previously P	aid For INTI	#S SPACE	is less tha	n 20, enter "20."	ADDIT, F	•		OFI	TOTAL ADOIT, FEE					
						** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***The "Highest Number Previously Paid For" (Total or Independent is the highest number found in the engraportate box in column 1.										